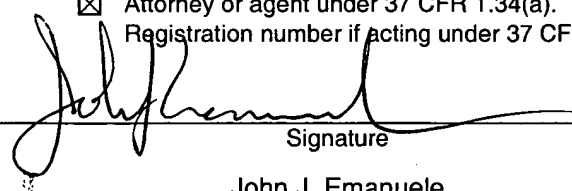| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	Docket Number (Optional) 7037-458
Application Number 10/080,943	Filed February 22, 2002
For Loren J. Field et al.	
Art Unit 1632	Examiner Joseph T. Woitach

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

		Fee	Small Entity Fee	
☐	One month [37 CFR 1.17(a)(1)]	$120	$60	$_____
☐	Two months [37 CFR 1.17(a)(2)]	$450	$225	$_____
☒	Three months [37 CFR 1.17(a)(3)]	$1020	$510	$ 510.00
☐	Four months [37 CFR 1.17(a)(4)]	$1590	$795	$_____
☐	Five months [37 CFR 1.17(a)(5)]	$2160	$1080	$_____

☒ Applicant claims small entity status. See 37 CFR 1.27.

☐ A check in the amount of the fee is enclosed.

☒ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☐ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 23-3030. I have enclosed a duplicate copy of this sheet.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the ☐ Applicant/inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.171.
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

☒ Attorney or agent of record.   Registration Number: 51,653

☒ Attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a): 51,653

_____ Signature	December 2, 2005 Date
John J. Emanuele Typed or Printed Name	317-634-3456 Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.

☒ *Total of _____ forms are submitted.

#374788 7037-458 JJE/nkg

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